

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 182

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

1199 SERVICE EMPLOYEES INT'L UNION FEDERAL POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A. LOIS WILLIAMS

Mailing Address 1646 EAST 96TH STREET

City State Zip Code
BROOKLYN NY 11236

FEC ID number of contributing federal political committee.

C

Name of Employer
Bensonhurst Center for Rehabilitation

Occupation
NURSING ASSISTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.17249

Amount of Each Receipt this Period

85.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

B. Marcus Williams

Mailing Address 37 Bircher Avenue LOT 9

City State Zip Code
Poughkeepsie NY 12601

FEC ID number of contributing federal political committee.

C

Name of Employer
Ferncliff Nursing Home

Occupation
Certified Nurses' Aide

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.17251

Amount of Each Receipt this Period

30.00

PAYROLL DEDUCTION

Full Name (Last, First, Middle Initial)

C. Roslyn Williams

Mailing Address 4024 Lakeside Dr

City State Zip Code
Tamarac FL 33319-3355

FEC ID number of contributing federal political committee.

C

Name of Employer
Westside Regional Medical

Occupation
Unit Assistant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
12 31 2015

Transaction ID : SA11AI.17256

Amount of Each Receipt this Period

280.00

PAYROLL DEDUCTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

395.00